SECTION A. REQUESTING AGENCY

Bargaining Unit(s): List the affected or related bargaining unit(s).

Department(s): List the requesting department(s).

Contract Article Number (if applicable): List applicable contract article number.

HR Contact: Provide the name, number, and email for the department's HR contact.

Labor Contact: Provide the name, number, and email for the department's labor contact.

Approved By: All requests must be approved by the department/agency head. Print the name and title of the approver.

SECTION B. PROPOSAL INFORMATION

Identify the type of compensation proposal.

Check the appropriate box to indicate what type of employee compensation is being requested, based on the following descriptions:

Pay differential: a form of compensation in addition to base pay that is typically provided to employees to recognize unique skill set, circumstances, or working conditions that may apply to some or all incumbents in a specific class.

Special salary adjustment: a permanent change to a classification's base salary or base salary ranges when warranted for the classification itself.

Allowances and reimbursements: additional compensation to employees for work related items such as uniforms, tools or equipment. It can also be provided for travel expenses, transportation incentives, relocation, tuition or professional dues, etc.

If the request does not fall under any of the above categories, please indicate OTHER and provide a description of the employee compensation that is being requested.

Identify the reason(s) for this compensation proposal.

Check the appropriate box to indicate the reason why employee compensation is being requested, based on the following descriptions:

Recruitment/Retention Issue: the compensation currently offered is insufficient to recruit and retain employees.

Equity Issue: the compensation between classifications that perform similar work requiring similar skills is significantly different (e.g., like-work for like-pay disparities).

Compaction Issue: when a supervisor/manager and their subordinate class have less than a 5% range differential between the max salaries. This may also exist between two rank-and-file classifications in a particular series.

Specialized Duties: special or unique duties performed beyond the typical scope of the classification that provide a benefit to the state (e.g., climbing pay, diving pay, bilingual pay).

Special Licenses or Certifications: acquisition or possession of special licenses, skills, or training beyond the minimum qualifications of the classification that provide a benefit to the state (e.g., CDL, CPA Certification or CPA License, Phlebotomy Certification).

If the request does not fall under any of the above, please indicate OTHER and provide a description of the reason for the employee compensation being requested.

Are there any pending State Personnel Board items related to this proposal?

Check the appropriate box to indicate if there are any pending State Personnel Board items related to this proposal. If so, specify the date of the board meeting.

EE Comp Proposal Title: Provide a succinct title that describes the proposed changes. Avoid generic terms such as "increased staff," "workload," or "augmentation."

Proposed Effective Date: Indicate the date for which this proposal would be effectuated.

EE Comp Proposal Description: Describe an overview of the proposal that clearly and concisely summarizes the request. If the proposed effective date is retroactive, explain why.

SECTION C. AFFECTED CLASSIFICATION(S)

List all classifications for which this proposal would apply on the attached excel spreadsheet.

List all rank and file and related excluded classifications that would be receiving the proposed compensation. List the supervisory or managerial classification tied to those classifications. Use the excel spreadsheet provided.

Are there other classifications in the same series for which this proposal would not apply? If so, list below.

List any rank and file and related excluded classifications in the series that would be not be receiving the proposed compensation. Use the excel spreadsheet provided.

Explain why these classifications are not included.

Employee compensation may be needed for a classification for recruitment and retention purposes that is not an issue for other classifications in that series. In this case, those classifications may be excluded from this request. Explain why these classifications would not be included. Be mindful of any impact that may result from excluding these classifications.

SECTION D. BACKGROUND/HISTORY

Provide a brief summary of the background or history as it relates to this proposal. Describe the purpose, specific conditions, or circumstances that warrant the requested compensation.

Provide context for the proposal based on factual information identifying what has changed to warrant the need for this proposal. This section should not include any arguments. Include only background or history relevant to the request. In your summary, please address the following:

- Provide an overview of the department's mission, as well as your particular unit's purpose as it relates to this proposal. What is the program, what does it do, and who does it serve or affect?

- Does the proposal support existing law or regulation? If so, describe how this proposal is in line with that authority.

- What resources are currently being utilized to address this situation? Summarize the current resource level in the narrative and include historical data.

- What is being done now by your department and others to address the problem/need?

- Was there a historical need for this proposal? If not, what changed?

- If this need has been ongoing, what has been done to address it? What were the outcomes of those situations?

- Has the department submitted this request before? If so, what was the outcome?

SECTION E. JUSTIFICATION

Attach the data used to justify the proposal, such as legislation, salary/compensation surveys, comparable pay differentials or special salary adjustments.

If this request relates to a recruitment and retention issue, please provide additional detailed information including three years of vacancy data,

examination plans, turnover data. Present this information on a separate spreadsheet.

Describe the reasons which support the establishment or revision of the proposed employee compensation. This should include relevant facts and figures supporting this proposal.

- What changes have occurred?

- How will this proposal address or solve the problem?

- What relevant and current facts and figures support the recommendation?

- Provide the methodology used to quantify the program/proposal objectives.

- How does this address a long-term or short-term need or a combination of both?

- Explain the timeframe for this problem or solution.

- What actions from other governmental entities are required for implementation (e.g., federal approval or state regulatory agency)?

- Identify other reasons besides salary that may be contributing to the recruitment and/or retention problem (e.g., lack of upward mobility, lack of educational or other incentives, working conditions).

If this request relates to a recruitment and retention issue, please provide additional detailed information related to vacancy rates, examination plans, turnover rates. Present this information on a separate spreadsheet.

- Provide vacancy data for each month over the last three years. The vacancy rate is determined by dividing the number of vacant positions by the number of total budgeted positions.
  - Include the number of established positions for those vacancy rate data points.
  - Identify whether any new positions (BCPs) were established in the series/classifications during the time period.

- Provide the department's examination plan. Include how often the exam is given, the types of recruitment efforts made, the number of applicants, the number of candidates on certification list, etc.

- Provide turnover data for each month over the last three years. The turnover rate is determined by dividing the number of employees who vacated the classification in the class by the total number of employees. Exclude turnover due to retirements, promotions, or dismissals.
  - Are employees going to a comparable classification in a different department, and if so, why? Identify the classification and the department.

Describe other solutions the department considered to resolve the issue. If any were attempted, what were the outcomes?

- Describe any steps taken to address the problem. Include any non-monetary efforts as well (e.g., MQ revisions, workforce/succession planning efforts, recruitment efforts).

- What were the results? Was there improvement in the situation?

- Why does this problem have to be addressed now? Can it wait?

How will this proposal solve the problem?

- Explain how this proposal specifically corrects the issue identified that previous attempts could not.

- Are there examples from other entities where this or similar approaches have been attempted? Include endeavors that were successful as well as those that were unsuccessful.

What are the operational consequences if the proposal is not approved?

- What operational problems could result if this proposal is not approved, including any detriment to public services offered?

SECTION F. IMPACT

Describe any foreseeable impact that may result from the approval of this request.

Describe any potential economic impact, workload impact, impact to departmental resources, impact to public services, etc. that may occur as a result of this request. Would there be impact to other state departments? In assessing this request, it is important to explain any anticipated concerns that may result from the approval of this request.

Identify any comparable classifications used by the department(s) that may be impacted by this proposal.

While this proposal identifies the classification(s) that would receive the requested compensation, there may be classifications outside of the series that could be impacted as well. For instance, those classifications may do comparable work in the department.

Provide the CBID, class code, and class titles for those classifications.

How will they be impacted?

Address the impact on the classifications listed above.

How would this proposal be implemented for current incumbents? How would this proposal be implemented for prospective employees?

For example, an employee may receive a pay differential provided they have served 12 months at the max salary of a classification. This would apply to current employees who have already served the time required whereas a new employee would not be eligible until they have served 12 months at the max salary.

Identify any existing forms of compensation similar to what is being requested.

Identify any types of compensation currently being utilized in state service that may mirror the employee compensation request in this proposal. For instance, are there other pay differentials, allowances, or reimbursements that a classification or a subgroup of classifications currently receive that are similar to this request?

Identify any concerns that may be anticipated from the employee organizations.

Has the department been in communication with any of the employee organizations regarding this proposal? If so, did they raise any concerns?

If not, provide any issues that the department believes could be anticipated from the employee organizations. If a similar proposal has been discussed with the employee organizations in the past, describe any issues that were raised then.

Does this request require any revisions to a collective bargaining contract? If so, provide the proposed contract language below.

Draft language that captures the intended purpose of this proposal. Be sure to include the affected article or section number.

SECTION G. FINANCIAL INFORMATION

Provide the financial information requested below. In addition, attach a cost analysis for this proposal.

What is the reason for the proposed effective date? During that fiscal year, can the department absorb the funding?

Explain the reasons for the proposed effective date. If this request is for a bargaining unit with an expiring contract, does the effective date occur before the expiration date of the current contact? If so, please explain.

In addition, explain whether the department can absorb the funding for the remainder of the fiscal year tied to the proposed effective date.

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Will funding need to be budgeted for future years? If not, what is the expiration date?

The department may be able to absorb the funding for the remainder of the fiscal year. However, if the compensation is ongoing, funds will need to be budgeted for future fiscal years.

If however there is an expiration date, provide that information as it will affect the cost of the compensation.

How frequently would eligible employees receive this compensation?

Indicate how often this compensation would be provided to employees. This information is important for determining the total cost. If the compensation is not one-time, monthly, or annually, check the box for Other and explain.

Would employees receive this compensation on a pro rata basis?

Would this compensation be provided proportionately based on an employee's time base? For example, if an employee only works 50% of the month, the pro-rated pay differential will be paid at 50%.

Is this compensation subject to retirement?

Indicate whether or not the compensation is defined as pensionable compensation as set forth in [Government Code Section 7522.34](#).

If the request involves a change to the minimum and maximum of the salary range, list the current and proposed salary ranges for the affected classifications.

If the request is to change either the minimum salary or maximum salary, or both, provide the current salary ranges as well as the proposed salary ranges. For example, if the request is to align the salary range of a classification with the salary range of another classification for equity purposes, the current and proposed salaries must be identified.

Provide any additional information that has not been addressed above. For example, are there any specific criteria to be eligible for this proposal?

If there is any additional financial-related information that has not already been addressed in this section that may impact the cost of this proposal, please provide that data here.